

Augusta Mental Health Institute Timeline: 1840-2004 ¹

Number of Patients ²	Decade	Key Events Affecting Patients
133 patients in 1841	1840s	<ul style="list-style-type: none"> ➤ Maine Insane Asylum opened in October 1840. ➤ Restraints used, but noted that many other institutions had abandoned their use.
253 patients in 1850	1850s	<ul style="list-style-type: none"> ➤ 2 South Wings and most of main building burned down in 1851. ➤ 100 applications refused for lack of space in 1852. New buildings completed. ➤ New wing built in 1854.
373 patients in 1860	1860s	<ul style="list-style-type: none"> ➤ New wing for females completed in 1866. ➤ Investigation of Maine Insane Asylum in 1868. “Rumors and charges abound about care and management of patients and conduct of financial affairs.”
467 patients in 1870	1870s	<ul style="list-style-type: none"> ➤ New wing for males completed in 1870. ➤ New hypnotic agent chloral hydrate used with bromides of potassium and ammonia. ➤ New law passed in 1874 requiring discharge of “imbecile” and “demented” patients. ➤ “Music, art, nature all calm and soothe the insane.” Used in their treatment.
607 patients in 1880	1880s	<ul style="list-style-type: none"> ➤ Chloral Hydrate and opiates no longer used, because they hurt more than help. ➤ Cascara sagrada used as laxative; bromides used to calm patients down. ➤ Patients classified according to behavior (quiet with quiet, loud with loud). ➤ New pavilion for males completed. ➤ “Insane best treated in clean, sunny spaces.”
833 patients in 1890	1890s	<ul style="list-style-type: none"> ➤ New pavilions completed. “Much better for classification of patients.” ➤ Legislature removed 40+ “chronically insane” and “imbeciles” in 1893. ➤ Annual trips by steamboat to Dr. Sanborn’s summer home on Isle of Springs.
1,020 patients in 1900	1900s	<ul style="list-style-type: none"> ➤ Static electricity introduced as treatment using Morton-Wimshurst Influence Machine. ➤ 146 patients moved to new hospital in Bangor in 1901. ➤ Sucus Alterans used as a sedative. Tincture of Passiflora Incarnate used as a sedative, anti-spasmodic and mild hypnotic. ➤ New convalescent home at Chase (Widow’s) Island. “Very beneficial to patients.” ➤ Continuous baths introduced. ➤ New building for criminally insane constructed on Arsenal grounds.
	1910s	Information missing.
	1920s	➤ New building constructed.
1,555 patients in 1932	1930s	<ul style="list-style-type: none"> ➤ Patients to reception wards first; then moved to others when their condition improved. ➤ Hydrotherapy “works well as sedatives.” ➤ Treatments included radiant heat, ultra violet, diathermy, sine wave (for women), galvanism and faradism, and electric needle. ➤ “Talkies” 2 times a week. ➤ Dances for patients and employees held every Monday for 7 months of winter season. ➤ Capacity increased with new building, but still overcrowded.
1,837 patients in 1940	1940s	<ul style="list-style-type: none"> ➤ Shock treatment by Insulin injections introduced. Shocks lasted 5-6 hours. ➤ 1940 law allowed for discharge of old, infirm cases that no longer required help. ➤ Because of staff shortages, no special treatments (hydrotherapy, insulin shock.) ➤ Patients received injections of Trypasamide, Bismuth Sodium Tartrate and Marpharsen. Patients received electro shock treatments. ➤ Occupational therapy expanded. ➤ There was psychological testing. ➤ Patients worked in the hospital farm and laundry—industrial therapy. ➤ Bi-weekly dances held.

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1,694 patients daily in 1950	1950s	<ul style="list-style-type: none"> ➤ Volunteer education program for patients. ➤ Serpasil and Thorazine introduced in 1954. ➤ Industrial therapy continued, including some patients working outside the institution. ➤ Psychologist conducted group therapy based on problem solving. ➤ Re-motivation groups started by the Nursing Service. ➤ New buildings constructed. ➤ First community mental health center established by institution in Lewiston.
1,747 patients daily in 1960	1960s	<ul style="list-style-type: none"> ➤ Intensified effort to move patients into boarding homes and foster homes. ➤ Institution authorized to accept alcoholics and narcotic and barbiturate addicts for 90 days. ➤ Many patients participated in night hospital and work placements. ➤ Lithium therapy introduced in 1969. ➤ Patients eligible for Medicaid and SSI.
Average daily patients dropped from 1,500 to 350 in 5 years	1970s	<ul style="list-style-type: none"> ➤ New on-grounds school established in 1970. ➤ Mandate to depopulate institution—de-institutionalization. ➤ Initiation of Patients' Bill of Rights and beginning of Patients' Advocate program. ➤ Creation of specialty unit for adolescents. ➤ First halfway house opened. ➤ Consent decree eliminated unpaid patient labor—industrial therapy. ➤ 200 patients registered to vote.
300 average daily patients in 1980	1980s	<ul style="list-style-type: none"> ➤ Patients' Rights bill passed. ➤ Voluntary admissions suspended because of overcrowding. ➤ Patient deaths triggered class action suit on behalf of patients in 1989.
285 average daily patients in 1991 142 average daily patients in 1996	1990s	<ul style="list-style-type: none"> ➤ Legislation passed to prevent closing of AMHI. ➤ AMHI Consent Decree specified that census and admissions must decrease, and services must be based on the needs of individual patients.
Licensed for 103 beds	2000s	<ul style="list-style-type: none"> ➤ New 92-bed state facility—Riverview Psychiatric Center—opened on AMHI grounds. ➤ AMHI closed in 2004.

1 This information is based on annual superintendent reports (1840-1909 and 1932-1947), excerpts from the diaries of Dr. Bigelow Sanborn (1860-1910), and various other newspaper clippings and reports.

2 From 1941-1940, the number of patients is the total number in the institution during the entire year. From 1950 on, the number of patients is the average number in the institution at one time during that year.